PTO/SB/06 (08-03)
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			CATIO	o persons are req N FEE DETE tute for Form P	RMINATIO			ormation unit		tion or Docket N	
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN SMALL ENTITY	
FOR . NUMBER FILED			NUME	NUMBER EXTRA		E	FEE		RATE	FEE	
	SIC FEE CFR 1.16(a))							s	OR		s
	TAL CLAIMS CFR 1.16(c))	, ,	mlnus 2	mlnus 20 = *		x s	_=		OR	x s=	
	EPENDENT CLAI CFR 1.16(b))	MS	minus 3 = *			x \$	_=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+5	=		OR	+s =		
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTA			OR	TOTAL	
CLAIMS AS AMENDED - PART II											
	(Column 1) (Column 2) (Column 3)				SMA	SMALL ENTITY			OTHEF SMALL	R THAN ENTITY	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ME	Total (37 CFR 1.16(c))	1)	Minus	70	=	x s	_=		OR	x s=	
AMENDMENT	Independent (37 CFR 1.16(b))	• ,	Minus	··· 3	=	x <b>s</b> _	=	-	OR	x s =	
AM	FIRST PRESENT	TATION OF MULTIP	LE DEPEND	ENT CLAIM (37 CI	FR 1.16(d))	+5	_		"OR	+5 =	
	L					TOTAL ADD'L FI	EE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)							٠		l		
AMENDMENT B		- CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OM	Total (37 CFR 1.16(c))	•	Minus	••	=	x \$			OR	x \$=	
ĒN	Independent (37 CFR 1.16(b))	•	Minus	***	=	x s	=		OR	x s=	
¥.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ s	_		OR	+ \$=	
							E		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ğ	Total (37 CFR 1.16(c))	•	Minus	••	=	× s	=		OR	x \$=	
AMENDME	Independent (37 CFR 1.16(b))	•	Minus .	•••	= ;	x \$	=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 5	=		OR	+ \$=	
									OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.